Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## Filing at a Glance

Company: American Fidelity Assurance Company

Product Name: ICI1 Rate Increase SERFF Tr Num: AFDL-128314835 State: Arkansas TOI: H07I Individual Health - Specified Disease SERFF Status: Closed-Approved- State Tr Num:

- Limited Benefit Closed

Sub-TOI: H07I.002A Dread Disease - Cancer Co Tr Num: ICI1 RATE INCREASE State Status: Approved-Closed

Only

Filing Type: Rate Reviewer(s): Rosalind Minor

Authors: Shari Vick, Melissa Disposition Date: 05/16/2012

Mahanes, Ashlie Snyder, Ann

Hobson

Date Submitted: 04/30/2012 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

#### **General Information**

Project Name: ICI1 Rate Increase Status of Filing in Domicile: Authorized

Project Number: ICI1 Rate Increase Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:

Explanation for Combination/Other: Market Type: Individual

Submission Type: Resubmission Previous Filing Number: AFDL-128287184

Individual Market Type: Overall Rate Impact: 10%

Filing Status Changed: 05/16/2012 State Status Changed: 05/16/2012

State Status Changed: 05/16/2012 Deemer Date:

Created By: Ashlie Snyder Submitted By: Ashlie Snyder

Corresponding Filing Tracking Number:

Filing Description:

THIS RESUBMISSION IS IN RESPONSE TO AFDL-128287184.

Enclosed for submission is information concerning an increase in premium rates for the above captioned individual, cancer indemnity policy. The policy was previously approved by your Department on 7/20/95 and is guaranteed renewable.

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

The rate increase was filed in our domiciliary state on April 20, 2012. A list of rates and the actuarial memorandum are attached to this filing. This policy has had no previous increases in your state. The effective date of this proposed increase will be no sooner than January 1, 2013, or the next plan date for those individuals under a Section 125 plan.

I hereby certify that to the best of my knowledge the rates submitted herewith are in compliance in all respects with the provisions of the insurance laws, rules and regulations of your State and such rates contain no provisions previously disapproved by the Department.

Thank you for your assistance with this matter. If you have any questions, please feel free to contact me at 1-800-654-8489, extension 5255. My email address is ashlie.snyder@af-group.com

State Narrative:

## **Company and Contact**

#### **Filing Contact Information**

Ashlie Snyder, Compliance Analyst I ashlie.snyder@af-group.com

800-654-8489 [Phone] 5255 [Ext]

Oklahoma City, OK 73160 405-523-5793 [FAX]

**Filing Company Information** 

American Fidelity Assurance Company CoCode: 60410 State of Domicile: Oklahoma

2000 North Classen Blvd Group Code: 330 Company Type: LAH
Oklahoma City, OK 73106 Group Name: State ID Number:

(405) 523-2000 ext. [Phone] FEIN Number: 73-0714500

-----

## **Filing Fees**

2000 Classen

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation:

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

American Fidelity Assurance Company \$50.00 04/30/2012 58778084

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Correspondence Summary**

#### **Dispositions**

Status Created By Created On Date Submitted

Approved- Rosalind Minor 05/16/2012 05/16/2012

Closed

**Objection Letters and Response Letters** 

Objection Letters Response Letters
Status Created By Created On Date Submitted Responded By Created On Date Submitted

Pending Rosalind Minor 05/14/2012 05/14/2012 Ashlie Snyder 05/14/2012 05/14/2012

Industry

Response

Pending Rosalind Minor 05/07/2012 05/07/2012 Ann Hobson 05/10/2012 05/10/2012

Industry

Response

**Filing Notes** 

Subject Note Type Created By Created Date Submitted

On

Rate Increse Request Reviewer Note Rosalind Minor 05/03/2012

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Disposition**

Disposition Date: 05/16/2012

Implementation Date: Status: Approved-Closed

Comment:

We have approved a 5% level rate increase on your submission. The approval is subject to the following conditions:

- 1. Rate increases will not be given prior to the first annual anniversary date of any policy.
- 2. After the first annual anniversary date of any policy, increases will not be given more frequently than once in a twelve (12) month period.
- 3. All increases in rates, other than a change in age or an individual moving to another geographical area, must be submitted to our Department for approval.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
			Program:				
American Fidelity Assurance Company	5.000%	5.000%	\$4,252	321	\$85,040	5.000%	5.000%

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

**Schedule** Schedule Item Schedule Item Status Public Access Supporting Document (revised) Health - Actuarial Justification Approved-Closed No **Supporting Document** Health - Actuarial Justification Replaced No **Supporting Document RESPONSE LETTER** Approved-Closed Yes **Supporting Document** Response Letter from Actuary 05/07/12 Approved-Closed Yes

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 05/14/2012 Submitted Date 05/14/2012

Respond By Date Dear Ashlie Snyder,

This will acknowledge receipt of the captioned filing.

#### Objection 1

- Response Letter from Actuary 05/07/12 (Supporting Document)

#### Comment:

We appreciate your comments in your letter of 5/7/12.

At this time, we will not approve more than the 5% offered. Please let us know if you wish to accept, in lieu of disapproval.

We appreciate your cooperation.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Response Letter**

Response Letter Status Submitted to State

Response Letter Date 05/14/2012 Submitted Date 05/14/2012

Dear Rosalind Minor,

#### Comments:

#### Response 1

Comments: We would like to accept the 5% increase

#### **Related Objection 1**

Applies To:

- Response Letter from Actuary 05/07/12 (Supporting Document)

#### Comment:

We appreciate your comments in your letter of 5/7/12.

At this time, we will not approve more than the 5% offered. Please let us know if you wish to accept, in lieu of disapproval.

We appreciate your cooperation.

#### **Changed Items:**

#### **Supporting Document Schedule Item Changes**

Satisfied -Name: Health - Actuarial Justification

Comment:

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Sincerely,

Ann Hobson, Ashlie Snyder, Melissa Mahanes, Shari Vick

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Objection Letter**

Objection Letter Status Pending Industry Response

Objection Letter Date 05/07/2012 Submitted Date 05/07/2012

Respond By Date Dear Ashlie Snyder,

This will acknowledge receipt of the captioned filing.

#### Objection 1

- Health Actuarial Justification (Supporting Document)
- RESPONSE LETTER (Supporting Document)

#### Comment:

Thank you for your recent response letter.

Our Department will consider no more than a 5% rate increase. If you wish to accept the 5%, please attach a copy of the rates reflecting the 5% increase.

We appreciate your cooperation in this matter.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Response Letter**

Response Letter Status Submitted to State

Response Letter Date 05/10/2012 Submitted Date 05/10/2012

Dear Rosalind Minor,

#### Comments:

#### Response 1

Comments: Please see the most recent Response Letter from Actuary (05/07/12) attached under the Supporting Docs tab.

Thank you.

#### **Related Objection 1**

Applies To:

- Health Actuarial Justification (Supporting Document)
- RESPONSE LETTER (Supporting Document)

Comment:

Thank you for your recent response letter.

Our Department will consider no more than a 5% rate increase. If you wish to accept the 5%, please attach a copy of the rates reflecting the 5% increase.

We appreciate your cooperation in this matter.

#### **Changed Items:**

#### **Supporting Document Schedule Item Changes**

Satisfied -Name: Response Letter from Actuary 05/07/12

Comment:

No Form Schedule items changed.

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

No Rate/Rule Schedule items changed.

Sincerely,

Ann Hobson, Ashlie Snyder, Melissa Mahanes, Shari Vick

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

**Reviewer Note** 

Created By:

Rosalind Minor on 05/03/2012 01:34 PM

**Last Edited By:**Rosalind Minor

Submitted On:

05/16/2012 02:03 PM

Subject:

Rate Increse Request

**Comments:** 

Rate request is in Dan's Office.

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

#### Post Submission Update Request Processed On 05/16/2012

Status: Allowed

Created By:Ashlie SnyderProcessed By:Rosalind Minor

**Comments:** 

**General Information:** 

Field NameRequested ChangePrior ValueStatus of Filing in DomicileAuthorizedPending

#### **Company Rate Information:**

**Company Name: American Fidelity Assurance Company** 

Field NameRequested ChangePrior ValueOverall % Indicated Change5.000%10.000%Overall % Rate Impact5.000%10.000%Written Premium Change for this\$4252\$8504

Program

Maximum %Change (where required) 5.000% 10.000% Minimum %Change (where required) 5.000% 10.000%

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Limited Benefit Sub-TOI: H071.002A Dread Disease - Cancer Only

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

#### **Rate Information**

Rate data applies to filing.

Filing Method: serff

Rate Change Type: Increase

Overall Percentage of Last Rate Revision:

**Effective Date of Last Rate Revision:** 

Filing Method of Last Filing:

**Company Rate Information** 

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
American Fidelity Assurance Company	5.000%	5.000%	\$4,252	321	\$85,040	5.000%	5.000%

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Supporting Document Schedules**

Item Status: Status

Date:

Satisfied - Item: Health - Actuarial Justification Approved-Closed 05/16/2012

**Comments:** 

**Attachments:** 

ICI-1\_AM\_2012\_AR.pdf ICI-1\_AM\_2012\_AR-5%.pdf

Item Status: Status

Date:

Satisfied - Item: RESPONSE LETTER Approved-Closed 05/16/2012

Comments: Attachment:

12\_0427\_Response.pdf

Item Status: Status

Date:

Satisfied - Item: Response Letter from Actuary Approved-Closed 05/16/2012

05/07/12

Comments:

Attachment:

AR\_ICI-1\_Objection\_20120507.pdf



A member of the American Fidelity Group

Weston Waller, ASA, MAAA Actuarial Analyst Phone: 405.523.5173

Fax: 405.523.5793

April 27, 2012

Arkansas Dept. of Insurance Via Electronic Communication

RE: ICI-1 Rate Increase

Thank you for your letter dated April 24, 2012 regarding the above referenced filing. The requests of the Dept. of Insurance appear below in italics.

It is the primary mission of the Arkansas Insurance Department to protect consumers. Arkansas is a relatively low-income state, and most of the consumers who would be affected by your proposed rate increase would suffer an undue hardship given the low loss ratio history indicated in this filing. Therefore given the low loss ratio history, and the lack of credibility, on this block of business we cannot approve a rate increase at this time.

Depending upon current benefit combinations retained, many of the customers have the option of reducing coverage to help with affordability. For example, customers who have the \$25,000 Indemnity Benefit Amount have the option of moving to the \$5,000, \$10,000, \$15,000, or \$20,000 Indemnity Benefit Amount in order to reduce the premium.

Regarding "low loss ratio history", I have attached the 1999-2011 past experience for both Arkansas and Nationwide for comparison purposes in the attached Exhibit V-AR. Arkansas has had significantly worse experience than Nationwide with a 1999-2011 Incurred Loss Ratio of 72% compared to 50% Nationwide. Please note that Nationwide experience has a lifetime actual to expected claims ratio of 120% and Arkansas has had worse experience than Nationwide.

Regarding "lack of credibility", the rate increase justification is not based on Arkansas specific experience but rather on Nationwide experience. The block on a nationwide basis is large enough to be considered credible.

We again request a rate increase of 10%.

Thank you for your time in reviewing our filing. Please let me know if you have any further questions.

Sincerely,

Weston Waller, ASA, MAAA

West Will

## American Fidelity Assurance Actuarial Memorandum Supplement

Cancer Indemnity Policy Form ICI-1 Arkansas

Exhibit V-AR
Past by Incurral Year as of 12/31/2011

End of Year Calendar Inforce Year Policies		Earned Paid Premium Claims		Outstanding Claim Liability & Reserve	Actual Incurred Claims	Actual Incurred Loss Ratio	
(a)	(b)	(c)	(d)	(e)	(f) = (d) + (e)	(g) = (f) / (c)	
NATIONWIDE P	ast Experience I	nception to Date	)				
1999	5,884	1,192,364	573,943	-	573,943	48%	
2000	8,847	1,573,039	574,315	-	574,315	37%	
2001	12,508	2,159,725	1,047,731	-	1,047,731	49%	
2002	19,984	3,190,294	1,435,091	-	1,435,091	45%	
2003	26,502	4,771,609	1,946,725	-	1,946,725	41%	
2004	30,839	5,914,042	2,669,795	-	2,669,795	45%	
2005	33,646	6,729,323	3,676,115	-	3,676,115	55%	
2006	37,184	7,627,280	3,968,100	-	3,968,100	52%	
2007	36,593	8,252,576	4,221,800	-	4,221,800	51%	
2008	35,232	8,225,507	3,928,450	12,782	3,941,232	48%	
2009	33,879	8,165,456	4,841,700	40,428	4,882,128	60%	
2010	32,536	7,997,297	4,395,425	105,634	4,501,059	56%	
2011	31,534	7,752,924	3,627,150	1,205,683	4,832,833	62%	
1999 - 2011		73,551,437	36,906,340	1,364,526	38,270,867	52%	

	End of Year			Outstanding	Actual	Actual
Calendar	Inforce	Earned	Paid	Claim Liability	Incurred	Incurred
Year	Policies	Premium	Claims	& Reserve	Claims	Loss Ratio
(a)	(b)	(c)	(d)	(e)	(f) = (d) + (e)	(g) = (f) / (c)
ARKANSAS Pa	st Experience Inc	ception to Date				
1999	64	13,184	1,560		1,560	12%
2000	59	15,756	1,470		1,470	9%
2001	114	13,772	57,175		57,175	415%
2002	330	34,078	16,210		16,210	48%
2003	443	78,582	75,225		75,225	96%
2004	525	101,279	37,850		37,850	37%
2005	607	123,788	50,625		50,625	41%
2006	605	144,698	54,650		54,650	38%
2007	522	138,825	110,925		110,925	80%
2008	473	125,726	58,225	252	58,477	47%
2009	423	114,402	117,100	798	117,898	103%
2010	375	104,286	79,700	2,085	81,785	78%
2011	321	90,250	80,800	23,793	104,593	116%
1999 - 2011		1,098,625	741,515	26,927	768,442	70%



A member of the American Fidelity Group

Weston Waller, ASA, MAAA Actuarial Analyst Phone: 405.523.5173

Fax: 405.523.5793

May 10, 2012

Arkansas Dept. of Insurance Via Electronic Communication

RE: ICI-1 Rate Increase

Thank you for your letter dated May 7, 2012 regarding the above referenced filing. The requests of the Dept. of Insurance appear below in italics.

Our Department will consider no more than a 5% rate increase. If you wish to accept the 5%, please attach a copy of the rates reflecting the 5% increase.

The attached Exhibit VI illustrates that a 28% rate increase is justifiable; we are only asking for 10% which is significantly less than what is justifiable.

We again request a rate increase of 10%.

Thank you for your time in reviewing our filing. Please let me know if you have any further questions.

Sincerely,

Weston Waller, ASA, MAAA

Wests Will

# American Fidelity Assurance Actuarial Memorandum

## Cancer Indemnity Policy Form ICI-1 Arkansas

Exhibit VI Nationwide Past and Future Experience by Incurral Year as of 12/31/2011

Calendar Year	End of Year Inforce Policies	Annual Lapse Rates	Earned Premium	Actual Incurred Claims	Actual Incurred Loss Ratio	Expected Incurred Loss Ratio	Actual to Expected Loss Ratio
(a)	(b)	(c)	(d)	(e)	(f) = (e) / (d)	(g)	(h) = (f) / (g)
Projected Expe	rience Assuming	28% Rate Incre	ase				
2012	26,173	17%	6,434,873	4,229,959	66%	53%	124%
2013	20,938	20%	6,583,397	3,715,475	56%	56%	100%
2014	17,797	15%	5,595,793	3,354,941	60%	60%	100%
2015	15,127	15%	4,756,283	3,021,894	64%	64%	100%
2016	12,857	15%	4,042,541	2,720,086	67%	67%	100%
2017	10,928	15%	3,436,019	2,445,231	71%	71%	100%
2018	9,288	15%	2,920,364	2,195,580	75%	75%	100%
2019	7,894	15%	2,482,058	1,970,827	79%	79%	100%
2020	6,709	15%	2,109,467	1,767,891	84%	84%	100%
2021	5,702	15%	1,792,842	1,582,821	88%	88%	100%
2022	4,846	15%	1,523,696	1,414,907	93%	93%	100%
2023	4,119	15%	1,295,110	1,264,171	98%	98%	100%
2024	3,501	15%	1,100,796	1,126,102	102%	102%	100%
2025	2,975	15%	935,410	1,001,898	107%	107%	100%
2026	2,528	15%	794,862	889,882	112%	112%	100%
2027	2,148	15%	675,381	789,410	117%	117%	100%
2028	1,825	15%	573,823	698,905	122%	122%	100%
2029	1,551	15%	487,671	617,577	127%	127%	100%
2030	1,318	15%	414,410	545,417	132%	132%	100%
Future			47,954,795	35,352,972	74%	72%	102%
pv @ 4.5%			38,509,768	27,276,963	71%	69%	103%
Lifetime			123,419,788	74,504,954	60%	54%	111%
pv @ 4.5%			134,129,457	76,133,789	57%	50%	113%

Filing Company: American Fidelity Assurance Company State Tracking Number:

Company Tracking Number: ICI1 RATE INCREASE

TOI: H071 Individual Health - Specified Disease - Sub-TOI: H071.002A Dread Disease - Cancer Only

Limited Benefit

Product Name: ICI1 Rate Increase

Project Name/Number: ICI1 Rate Increase/ICI1 Rate Increase

## **Superseded Schedule Items**

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date: Schedule Schedule Item Name Replacement Attached Document(s)

**Creation Date** 

04/30/2012 Supporting Health - Actuarial Justification 05/14/2012 ICI-1\_AM\_2012\_AR.pdf

Document